## **Amendments to the Claims**

This listing of claims will replace all prior versions and listings of claims in the application:

## **Listing of Claims**

- 1. (Currently amended) A method for the treatment of renal cell cancer comprising co-administering an anti-tumor antibody directed against the MN antigen, wherein said antitumor antibody is a chimeric or humanized G250 antibody or a fragment thereof and a cytokine to a subject in need thereof, wherein the cytokine consists of an interferon is  $\underline{\text{IFN-}\alpha}$  and is administered continuously or repeatedly in a low-dose form, wherein the low-dose cytokine comprises a dose which is pharmaceutically effective in the absence of NIC CTC toxicity grade 3 or higher.
- 2. (Previously presented) A method for the treatment of renal cell cancer comprising co-administering an anti-tumor antibody directed against the MN antigen and cytokine to a subject in need thereof, wherein the cytokine consists of an interferon and the method comprises:
- (a) a first treatment stage comprising administering a low-dose cytokine, and
- (b) a second treatment stage comprising co-administering the anti-tumor antibody and a low-dose cytokine, and wherein the low-dose cytokine comprises a dose which is pharmaceutically effective in the absence of NIC CTC toxicity grade 3 or higher.
- 3. (Cancelled)

	(Previously Presented) The method according to claim 1 comprising a daily
admir	nistration of a low-dose cytokine.
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5-7.	(Cancelled)
8.	(Canceled)
0	(Currently amended). The method of claim 9.1, wherein the does of IEN a is in
9.	(Currently amended) The method of claim 8 $\underline{1}$ , wherein the dose of IFN- $\alpha$ is in
the ra	nge of from 1-10 MIU three times a week.
10.	(Previously Presented) The method of claim 1 wherein the cytokine is
admin	nistered in a constant dose during the treatment.
admin	nistered in a constant dose during the treatment.
admir	istered in a constant dose during the treatment.  (Canceled)
11.	(Canceled)
11. 12.	(Canceled)
11. 12.	(Canceled)  (Previously Presented) The method of claim 1 wherein the cytokine is
11. 12. admin	(Canceled)  (Previously Presented) The method of claim 1 wherein the cytokine is sistered subcutaneously.
11. 12.	(Canceled)  (Previously Presented) The method of claim 1 wherein the cytokine is
11. 12. admin	(Canceled)  (Previously Presented) The method of claim 1 wherein the cytokine is nistered subcutaneously.
11. 12. admin	(Canceled)  (Previously Presented) The method of claim 1 wherein the cytokine is sistered subcutaneously.

- 15. (Previously Presented) The method of claim 1 wherein the antitumor antibody is administered in intervals of from 5-20 days.
- 16. (Original) The method of claim 2 wherein the first treatment stage comprises 5-20 days.
- 17. (Original) The method of claim 2 wherein the second treatment stage comprises 50-200 days.
- 18. (Previously Presented) A method for the treatment of renal cell cancer comprising co-administering an anti-tumor antibody G250 or a fragment thereof and a cytokine IFN-α to a subject in need thereof, wherein the cytokine is administered continuously or repeatedly in a low-dose form, wherein the low-dose cytokine comprises a dose which is pharmaceutically effective in the absence of NIC CTC toxicity grade 3 or higher.
- 19. (New) A method for the treatment of renal cell cancer consisting essentially of coadministering an anti-tumor antibody directed against the MN antigen, wherein said antitumor antibody is a chimeric or humanized G250 antibody or a fragment thereof and a cytokine to a subject in need thereof, wherein the cytokine is IFN-α and is administered continuously or repeatedly in a low-dose form, wherein the low-dose cytokine comprises a dose which is pharmaceutically effective in the absence of NIC CTC toxicity grade 3 or higher.